24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
MIDDLE CLASS VALUES PAC	
	C C00594507
Check if X 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
Facebook	M M / D D / Y Y Y Y
Mailing Address 1 Hacker Way	06 13 2016 Amount
City State Zip Code	1503.58
Menlo Park CA 94025	Transaction ID: WFT2016521719-1 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising Category/ Type	06 / 13 / 2016
Name of Federal Candidate Support Office	e Sought: X House District:04
Lee Susie Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disbut 25863.98 Disbut 2016	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
	ursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1503.58
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(c) TOTAL Independent Experialitures	1503.58
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	•
Headley Rachel	M / D D / Y P Y P Y
Signature [Electronically Filed] Date	6 14 2016
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